

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000297793

**Entity Name:** ROSANO SERVICES LLC

**Current Principal Place of Business:**

3859 WINDING LAKE CIRCLE  
ORLANDO, FL 32835

**Current Mailing Address:**

3859 WINDING LAKE CIRCLE  
ORLANDO, FL 32835 US

**FEI Number:** 35-2679838

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LEGIT CONSULTING SERVICES, LLC  
6735 CONROY WINDERMERE RD  
233  
ORLANDO, FL 32835 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name BLANDINO DE ROSANO, ELBA JULIA  
Address 3859 WINDING LAKE CIRCLE  
City-State-Zip: ORLANDO FL 32835

Title AMBR  
Name ROSANO, JUAN ANTONIO  
Address 3859 WINDING LAKE CIRCLE  
City-State-Zip: ORLANDO FL 32835

Title AMBR  
Name ANIBAL ROSANO, FACUNDO  
Address 3859 WINDING LAKE CIRCLE  
City-State-Zip: ORLANDO FL 32835

Title AMBR  
Name ROSANO, NAHUEL AUGUSTO  
Address 3859 WINDING LAKE CIRCLE  
City-State-Zip: ORLANDO FL 32835

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BLANDINO DE ROSANO , ELBA JULIA

AMBR

03/05/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date